NICU FOLLOW UP HOME VISITATION PILOT

ROSE MARY ASMAN R.N., M.P.A.
PERINATAL HEALTH UNIT MANAGER
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

CHARGE

To develop a model for NICU follow up home visitation

PARTICIPANTS

- Maternal Infant Health Program (MIHP) representatives:
  - Kent
  - Ottawa
  - Muskegon
  - MDCH:
    - Family and Community Health
    - Medicaid Policy

PARTICIPANTS CONT.

- Children's Special Health Care Services (CSHCS) representatives :
  - Kent
  - Ottawa
  - Muskegon
  - MDCH
- Early On
- Welcome Home Baby
- Institute for Health Care Studies (MSU)
- Developmental Assessment Clinic Coordinator
- Neonatal Physicians

CONSIDERATIONS

- What home visiting model would be used?
- Who would receive visits?
- What would the visit look like?
- What would be assessed?
- What would the form look like?
- How long would the visit last?
- What is the purpose of the visit?
- What interventions would be offered?

CONSIDERATIONS CONT.

- What data would be collected?
- Where would the data be stored?
- What would be communicated to the NICU?
- What would be communicated to the physician?
- What credentials are required for the home visitor?
- What training would the home visitor need?
- How is it determined which home visitor would visit family?

THE TWO PROGRAMS

- Children's Special Health Care Services (CSHCS)
- Maternal Infant Health Program (MIHP)

CSHCS

- CSHCS strives to enable individuals with special health care needs to have improved health outcomes and an enhanced quality of life through the appropriate use of the CSHCS system of care.

CSHCS

- Services are provided by local health departments through out the state.
- The Registered Nurses are trained in service needs of the CSHCS population and demonstrate skill and sensitivity in communicating with children with special needs and their families.
- The program is available for Michigan residents who are a US citizen or documented non-citizen with permanent residence or admitted migrant farm worker.
- Provides for care coordination and case management services as well as transportation assistance.

CSHCS SERVICES

- Assist individuals with special health care needs in accessing the broadest possible range of appropriate medical care, health education and supports.
- Assure delivery of these services and supports in an accessible, family centered, culturally competent, community-based and coordinated manner.
- Promote and incorporate parent/professional collaboration in all aspects of the program.
- Remove barriers that prevent individuals with special health care needs from achieving these goals.

CSHCS SERVICES

CSHCS helps persons with chronic health problems by providing:

- **Coverage and referral for specialty services based on the person's health problems.**
- **Family centered services to support parents in their role as primary caretaker of their child.**
- **Community based services to help parents care for their child at home and maintain normal routines.**
- **Culturally competent services which demonstrate awareness of cultural differences.**
- **Coordinated services to pull together the services of many different providers who work within different agencies.**

MIHP

- **The goal of MIHP is to support Medicaid beneficiaries in order to promote healthy pregnancies, positive birth outcomes, and infant health and development.**

MIHP

- Services are intended to supplement medical (prenatal and infant) care.
- MIHP provides care coordination and intervention services, focusing on the mother-infant dyad.
- MIHP is a program for all Michigan women with Medicaid health insurance who are pregnant and all infants with Medicaid.
- MIHPs are administered in rural, urban and native communities through federally qualified health centers, hospital based clinics and private providers as well as through local public health departments.
- Program services include social work, nutrition counseling, nursing services (including health education and nutrition education) and beneficiary advocacy services.

MIHP SERVICES

- Psychosocial and nutritional assessment
- Plan of care development
- Professional intervention services
- Maternal and infant health and nutrition education
- Arranging transportation as needed for health care, substance abuse treatment, support services, and/or pregnancy-related appointments

MIHP SERVICES

- Referral to community services (e.g., mental health, substance abuse)
- Coordination with other medical care providers and Medicaid Health Plans (MHPs)
- Family Planning education and referral
- Coordinating or providing childbirth or parenting education classes

CHALLENGES ENCOUNTERED

- Philosophy of each program
- Population based services versus a defined population
- Asking of sensitive questions:
  - Substance use: drugs and alcohol
  - Mental health /depression
  - Family planning
  - Domestic violence

CHALLENGES ENCOUNTERED CONT.

- Length of visits
- How to conduct visit
- Open ended general questions versus defined direct questions
- Readiness of mother/caretaker to take care of infant versus assessment of mother/caretaker's psychosocial issues and needs.
- Keeper of records and sharing of information with family and NICU

WHAT HAS BEEN ACCOMPLISHED

- Purpose of visit: To ensure a safe discharge of the infant from the NICU by assuring the readiness of the family and the safety of the home environment.
- It is a voluntary program with an opt out
- First home visit will occur approximately one to two weeks prior to infant's anticipated NICU discharge.

WHAT THE VISIT LOOKS LIKE

- Completed by a Registered Nurse
- Will take approximately 1-1 1/2 hours
- Completion of an assessment
  - Demographic
  - Home environment
  - Care taker needs, issues and concerns
- Provision of education and assistance with referrals
- Completion of a summary and plan/education/referral including family reaction to the home visit
- Communication back to the NICU

WHAT STILL NEEDS TO BE COMPLETED

- Completion of assessment form
- Interventions
- Data collection and data base
- Medicaid policy and fee
- Follow up home visit after discharge form and interventions
- Communication procedures
- Training

SPECIAL THANKS

- Kent County Health Department for meeting space
- Muskegon, Ottawa and Kent MIHP, CSHCS and other community representatives